

HAMILTON, BROOK, SMITH & REYNOLDS, P.C.

**UTILITY
PATENT APPLICATION
TRANSMITTAL**
*(Only for new nonprovisional applications under
37 C.F.R. 1.53(b))*

Attorney Docket No.	0918.2015-(PD99-2858)
First Named Inventor or Application Identifier	Christopher Henry Rohrs
Express Mail Label No.	EL552280622US

A
1C836 US 603271 PRO
06/28/00

Title of Invention

ADAPTIVE TYPE-PARTITIONED GARBAGE COLLECTION

APPLICATION ELEMENTS

(See MPEP chapter 600 concerning utility patent application contents.)

- | | |
|---|--|
| 1. [X] Fee Transmittal Form
<i>(Submit an original, and a duplicate for fee processing)</i> | 6. [] Microfiche Computer Program (<i>Appendix</i>) |
| 2. [X] Specification [Total Pages [31]]
<i>(preferred arrangement set forth below)</i> | 7. [] Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all necessary) |
| - Descriptive title of the invention | a. [] Computer Readable Copy |
| - Cross References to Related Applications | b. [] Paper Copy (identical to computer copy) |
| - Statement Regarding Fed sponsored R & D | [] Pages |
| - Reference to microfiche Appendix | c. [] Statement verifying identity of above copies |
| - Background of the Invention | |
| - Summary of the Invention | |
| - Brief Description of the Drawings | |
| - Detailed Description | |
| - Claim(s) | |
| - Abstract of the Disclosure | |
| 3. [X] Drawing(s) (35 U.S.C. 113) [Total Sheets [17]]
[] Formal [X] Informal | |
| 4. [X] Oath or Declaration [Total Pages [1]] | |
| a. [X] Newly executed (original or copy) | 8. [x] Assignment Papers (cover sheet & documents) |
| b. [] Copy from a prior application (37 C.F.R. 1.63(d))
<i>(for continuation/divisional with Box 17 completed)</i>
[NOTE Box 5 below] | 9. [] 37 C.F.R. 3.73(b) Statement [] Power of Attorney
<i>(when there is an assignee)</i> |
| i. [] <u>DELETION OF INVENTOR(S)</u>
Signed statement attached deleting
inventor(s) named in the prior
application, see 37 C.F.R. 1.63(d)(2)
and 1.33(b). | 10. [] English Translation Document (<i>if applicable</i>) |
| 5. [] Incorporation By Reference (<i>useable if Box 4b is checked</i>)
The entire disclosure of the prior application, from which a
copy of the oath or declaration is supplied under Box 4b, is
considered as being part of the disclosure of the accompanying
application and is hereby incorporated by reference therein. | 11. [x] Information Disclosure Statement (IDS)/PTO-1449 [x] Copies of IDS Citations |
| 17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information:
[] Continuation [] Divisional [] Continuation-in-part (CIP) of prior application No.: _____ | 12. [] Preliminary Amendment |
| Prior application information: Examiner: _____ | 13. [X] Return Receipt Postcard (MPEP 503)
<i>(Should be specifically itemized)</i> |
| | 14. [] Small Entity [] Statement filed in prior application,
Statement(s) status still proper and desired |
| | 15. [] Certified Copy of Priority Document(s)
<i>(if foreign priority is claimed)</i> |
| | 16. [x] Other: <u>Power of Attorney by Assignee</u>
_____ |

ACCOMPANYING APPLICATION PARTS

8. [x] Assignment Papers (cover sheet & documents)
9. [] 37 C.F.R. 3.73(b) Statement [] Power of Attorney
(when there is an assignee)
10. [] English Translation Document (*if applicable*)
11. [x] Information Disclosure Statement (IDS)/PTO-1449 [x] Copies of IDS Citations
12. [] Preliminary Amendment
13. [X] Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)
14. [] Small Entity [] Statement filed in prior application,
Statement(s) status still proper and desired
15. [] Certified Copy of Priority Document(s)
(if foreign priority is claimed)
16. [x] Other: Power of Attorney by Assignee

17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information:

[] Continuation [] Divisional [] Continuation-in-part (CIP) of prior application No.: _____

Prior application information: Examiner: _____ Group Art Unit: _____

18. CORRESPONDENCE ADDRESS

NAME	Mary Lou Wakimura, Esq.				
	HAMILTON, BROOK, SMITH & REYNOLDS, P.C.				
ADDRESS	Two Militia Drive				
CITY	Lexington	STATE	MA	ZIP CODE	02421-4799
COUNTRY	USA	TELEPHONE	(781) 861-6240	FAX	(781) 861-9540

Signature	Caroline M. Fleming	Date	6-28-00
Submitted by Typed or Printed Name	Caroline M. Fleming	Reg. Number	45,566